

Page 1 of 3

Docket No. GCI-0017

Declaration and Power of Attorney For Patent Application

English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as state	ed below next to my name,
I believe I am the original, first and sole inventor (if only one net first and joint inventor (if plural names are listed below) of the which a patent is sought on the invention entitled	name is listed below) or an original, e subject matter which is claimed and for
Method for Identifying Increased Risk of Death from Community Acq Pneumonia	uired
the specification of which	
(check one)	
☐ is attached hereto.	
■ was filed on October 10, 2001 as United State	es Application No. or PCT International
Application Number 09/973,850	
and was amended on	
(if applic	able)
I hereby state that I have reviewed and understand the conteincluding the claims, as amended by any amendment referred	
I acknowledge the duty to disclose to the United States Pate known to me to be material to patentability as defined in Section 1.56.	ent and Trademark Office all information Title 37, Code of Federal Regulations,
I hereby claim foreign priority benefits under Title 35, Unit Section 365(b) of any foreign application(s) for patent or invany PCT International application which designated at least of listed below and have also identified below, by checking the binventor's certificate or PCT International application having a on which priority is claimed.	ventor's certificate, or Section 365(a) of ne country other than the United States, pox, any foreign application for patent or
Prior Foreign Application(s)	Priority Not Claimed
(Number) (Country) (Day	/Month/Year Filed)
(Number) (Country) (Day	/Month/Year Filed)
	/Month/Year Filed)

	hereby	claim	the	benefit	under	35	U.S.C.	Section	119(e)	of	any	United	States	provisional
а	pplication	n(s) list	ted b	elow:										

60/239,133	October 10, 2000
(Application Serial No.)	(Filing Date)
(Application Serial No.)	(Filing Date)
(Application Serial No.)	(Filing Date)

I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, C. F. R., Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (*list name and registration number*)



PATENT TRADEMARK OFFICE

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Sole or first inventor's signature

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Full name of second inventor, if any Grant William Waterer

Second inventor's signature

Date

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Citizenship

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the specification of which

FEB 2 7 2002

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Method for Identifying Increased Risk of Death from Community Acquired Pneumonia

(check one)	
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and was amended on	
	(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Applicat	ion(s)		Priority Not Claimed
(Number)	(Country)	(Day/Month/Year Filed)	
(Number)	(Country)	(Day/Month/Year Filed) (Day/Month/Year Filed)	
(Number)	(Country)	(Day/Month/Year Filed)	

60/239.133	October 10, 2000	
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